2007 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # G28678 1. Entity Name DAN STEWART, P.A. Principal Place of Business Mailing Address P.O. BOX 606- 4519 Hwy90 MILTON, FL 32572 US Pace FL 32571 % GEORGE DANIEL STEWART 4519 HIGHWAY 90 PACE, FL 32571 DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent

SIGNATURE

FILED Apr 23, 2007 8:00 am Secretary of State

04-23-2007 90069 012 ***158.75

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No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2245923

Not Applicable

Applied For

5. Certificate of Status Desired

Date

Daytere Phase #

\$8.75 Additional Fee Required

STEWART, GEORGE DANIEL DO NOT WRITE 4519 HIGHWAY 90 PACE, FL 32571 IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE					
Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution Added to Fees		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			·
NAME STREET ADDRESS CITY ST-ZIP	PTS STEWART, GEORGE D 4519 HIGHWAY 90 PACE, FL 32571				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY ST-ZIP					
NAME STREET ADDRESS CITY-ST-ZIP	_	,			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report of supplemental report is rule and activate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee emplowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like employed.					

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR